

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 29, 1999

Application or Docket Number  
*016610240*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE	<i>NEED ENOUGH TRANSLATION</i>	
TOTAL CLAIMS	20	minus 20 = *
INDEPENDENT CLAIMS	9	minus 3 = * 6
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**SMALL ENTITY**

TYPE

OR **OTHER THAN  
SMALL ENTITY**

RATE	FEE	RATE	FEE
	345.00	<i>710.00</i>	<i>690.00</i>
X\$ 9=		X\$18=	
X39=		X78=	<i>480.60</i>
+130=		+260=	
TOTAL		TOTAL	

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	28	Minus ** 20 = 8
Independent	*	16	Minus *** 9 = 7	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	<i>144</i>
X39=		X78=	<i>602</i>
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	18	Minus ** 18 = 0
Independent	*	16	Minus *** 16 = 0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus **	=
Independent	*	Minus ***		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE  
(CALCULATION SHEET)**

APPLICATION NUMBER: 96000080

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra X	Fee	Fee	-	Total
				Sm. Entity	Lg. Entity	
	Sm./Lg.					
Basic Filing Fee	<u>201/101</u>			<u>345</u>	<u>190</u>	<u>155</u>
Total Claims >20	<u>203/103</u>	-20 =	X	<u>9</u>	<u>15</u>	<u>6</u>
Independent Claims >3	<u>202/102</u>	-3 =	X	<u>31</u>	<u>78</u>	<u>47</u>
Mult. Dep Claim Present	<u>204/104</u>			<u>130</u>	<u>260</u>	<u>130</u>
Surcharge	<u>205/105</u>			<u>65</u>	<u>130</u>	<u>130</u>
English Translation	<u>139</u>					<u>950</u>

**TOTAL FEE CALCULATION**

Fees due upon filing the application:

Total Filing Fees Due = \$ 950

NEED ENGLISH  
TRANSLATION

Less Filing Fees Submitted - \$ 0  
950

BALANCE DUE = \$ \_\_\_\_\_

  
Office of Initial Patent Examination